


**UNITED STATES PATENT AND TRADEMARK OFFICE****PATENT**  
**RECEIVED**  
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In re: Yoshiaki Kato et al. Confirmation No.: 5276  
Serial No.: 10/606,871 Examiner: E. Leon  
Filing Date: June 26, 2003 Group Art Unit: 2833  
Docket No.: 1018.1174101 Customer No.: 28075  
For: **DEVICE FOR TEMPORARILY FASTENING ELECTRONIC COMPONENT  
TO CIRCUIT BOARD**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT**

<b>CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. §1.8 (1)(B))</b>	
I hereby certify that this correspondence is being transmitted by facsimile to the United States Patent and Trademark Office at 703-872-9306 on the date shown below.	
Kathleen L. Bockley	
Type or print name of person signing certification	
	February 25, 2005
Signature	Date

Dear Sir:

This paper is in response to the Office Action mailed November 30, 2004, with a shortened statutory period set to expire on February 28, 2005. This paper is filed within the set period for response such that no extension of time is necessary.

Please consider the following amendments and/or remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.

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# PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

10/606871

## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	
INDEPENDENT CLAIMS	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	385.00
XS 9=	
X43=	
+145=	
TOTAL	

RATE	FEE
BASIC FEE	770.00
XS18=	
X86=	
+290=	
TOTAL	

## CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	19	Minus	20
Independent	4	Minus	4
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL	
ADDITIONAL FEE	

RATE	ADDITIONAL FEE
XS18=	
X86=	
+290=	
TOTAL	
ADDITIONAL FEE	

2/25/05

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	22	Minus	20
Independent	3	Minus	4
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
25	
100	
180	
TOTAL	
ADDITIONAL FEE	

RATE	ADDITIONAL FEE
50	
200	
360	
TOTAL	
ADDITIONAL FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	
Independent		Minus	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL	
ADDITIONAL FEE	

RATE	ADDITIONAL FEE
XS18=	
X86=	
+290=	
TOTAL	
ADDITIONAL FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.